



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH  
COVER SHEET PG 2**

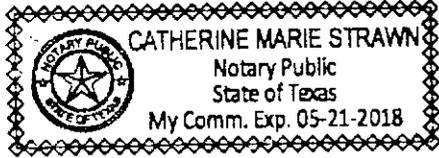
13 C/OH NAME Daniel, Katrina (Ms.)	14 ACCOUNT # (Ethics Commission filers) 00000004
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ...	
	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME :  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,625.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 27,406.70
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 19,860.45
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

*K Daniel*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Katrina Daniel, this the 14 day of January, 2015, to certify which, witness my hand and seal of office.

Catherine Marie Strawn  
Signature of officer administering oath

Catherine Marie Strawn  
Print name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/2 Report: 3/15	
<b>2</b> FILER NAME Daniel, Katrina (Ms.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000004	
<b>4</b> Date  10/31/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bulkin, Ben  <b>6</b> Contributor address; City; State; Zip Code 507 Highland Hills Circle Austin, TX 78731	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) RE		<b>10</b> Employer (See Instructions) Endeavor	
<b>4</b> Date  10/30/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cody, Buck  <b>6</b> Contributor address; City; State; Zip Code 5708 Highland Hills Drive Austin, TX 78731	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Development/Brokerage		Employer (See Instructions) Endeavor Real Estate Group	
<b>4</b> Date  10/28/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davidov, Allan & Dean  <b>6</b> Contributor address; City; State; Zip Code 433 North Camden Drive Suite 1177 Beverly Hills, CA 90210	<b>7</b> Amount of contribution (\$)  \$350.00	<b>8</b> In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Member		Employer (See Instructions) Austin Renaissance GP	
<b>4</b> Date  10/28/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davidov, Allan & Dean  <b>6</b> Contributor address; City; State; Zip Code 433 North Camden Drive Suite 1177 Beverly Hills, CA 90210	<b>7</b> Amount of contribution (\$)  \$350.00	<b>8</b> In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Member		Employer (See Instructions) Austin Renaissance GP	
<b>4</b> Date  10/29/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hubbard, David  <b>6</b> Contributor address; City; State; Zip Code 926 E. 54th St. Unit A Austin, TX 78751	<b>7</b> Amount of contribution (\$)  \$200.00	<b>8</b> In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Premier Legislative Consulting	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 2/2 Report: 4/15

**2** FILER NAME Daniel, Katrina (Ms.)

**3** ACCOUNT # (Ethics Commission filers)  
00000004

**4** Date  
10/28/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
McCandless, Patricia III (Mr.)

**7** Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

\$75.00

**6** Contributor address; City; State; Zip Code  
909 Live Oak Ridge Rd  
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)  
Attorney

**10** Employer (See Instructions)  
Blue Cross Blue Shield

Date  
10/29/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Pastor, Andrew

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$350.00

Contributor address; City; State; Zip Code  
2908 Sparkling Brook Drive  
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Real Estate

Employer (See Instructions)  
Endeavor Real Estate Group

Date  
10/31/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Zimel, Adam

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$100.00

Contributor address; City; State; Zip Code  
4009 Madrid Cove  
Austin, TX 78759

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Commerercial Real Estate

Employer (See Instructions)  
Endeavor Real Estate Group



# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 1/10 Report: 6/15	<b>2</b> FILER NAME Daniel, Katrina (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00000004
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<b>4</b> Date 10/28/2014	<b>5</b> Payee name Ace Printing
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<b>6</b> Amount (\$) \$649.90	<b>7</b> Payee address City: State: Zip Code 7807 Doncaster Austin, TX 78745
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing and shipping yard signs  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/28/2014	Payee name Azul Strategies
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Amount (\$) \$6,351.99	Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> mailers, robo calls, push cards, chironical ad  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/10/2014	Payee name Azul Strategies
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Amount (\$) \$2,977.68	Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising, sign placement, live calls, lit drop, robo  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/13/2015	Payee name Azul Strategies
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Amount (\$) \$5,599.03	Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Walk Shifts Final, Sign Remediation, Party Reimbursement, Fundraising, Admin Closeout  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/10 Report: 7/15	<b>2</b> FILER NAME Daniel, Katrina (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00000004
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<b>4</b> Date 11/02/2014	<b>5</b> Payee name Brass, Chelsea (Ms.)
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<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll 10/16/2014 - 10/31/2014  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/02/2014	Payee name Brass, Chelsea (Ms.)
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Amount (\$) \$300.00	Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mileage reimbursement for duration of campaign  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/06/2014	Payee name Brass, Chelsea (Ms.)
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Amount (\$) \$300.00	Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mileage for duration of campaign - lost check replacement  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/06/2014	Payee name Brass, Chelsea (Ms.)
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Amount (\$) \$1,000.00	Payee address City; State; Zip Code 8205 Brettonwoods Lane Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll for wks 10/16/2014 - 10/31/2014 - lost check replacement  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/10 Report: 8/15	<b>2 FILER NAME</b> Daniel, Katrina (Ms.)	<b>3 ACCOUNT #</b> (TEC filers) 00000004
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<b>4 Date</b> 11/12/2014	<b>5 Payee name</b> Brass, Chelsea (Ms.)
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<b>6 Amount (\$)</b> \$2,000.00	<b>7 Payee address</b> City: State: Zip Code 8205 Brettonwoods Lane Austin, TX 78753
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<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bonus  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 11/02/2014	<b>Payee name</b> Facebook
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<b>Amount (\$)</b> \$51.81	<b>Payee address</b> City: State: Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook ads  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 12/10/2014	<b>Payee name</b> Fed Ex
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<b>Amount (\$)</b> \$32.46	<b>Payee address</b> City: State: Zip Code 6406 N I H 35 Austin, TX 78752
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Business Cards  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 12/10/2014	<b>Payee name</b> Frys
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<b>Amount (\$)</b> \$6.46	<b>Payee address</b> City: State: Zip Code 12707 North Mopac Expressway Austin, TX 78727
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Belkin USB  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/10 Report: 9/15	<b>2</b> FILER NAME Daniel, Katrina (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 00000004
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<b>4</b> Date 12/10/2014	<b>5</b> Payee name H E B
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<b>6</b> Amount (\$) \$98.00	<b>7</b> Payee address City; State; Zip Code 1000 E 41st Street Austin, TX 78751
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/31/2014	Payee name Headliners Club
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Amount (\$) \$546.80	Payee address City; State; Zip Code PO Box 97 Austin, TX 78767
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Event  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/10/2014	Payee name Louann, McLaughlin
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Amount (\$) \$100.00	Payee address City; State; Zip Code 602 Wilmes Dr Austin, TX 78752
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard Signs  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/02/2014	Payee name Martinez, Cristian
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Amount (\$) \$200.00	Payee address City; State; Zip Code 201 E. 21st St M0813R Austin, TX 78705
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing 10/20/14 - 11/02/2014  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/10 Report: 10/15		<b>2</b> FILER NAME Daniel, Katrina (Ms.)		<b>3</b> ACCOUNT # (TEC filers) 00000004	
<b>4</b> Date 11/12/2014		<b>5</b> Payee name Martinez, Cristian			
<b>6</b> Amount (\$) \$180.00		<b>7</b> Payee address City; State; Zip Code 201 E. 21st St #M0813R Austin, TX 78705			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Martinez, Nora			
Amount (\$) \$40.00		Payee address City; State; Zip Code 1300 Crossing Place Apt 0622 Austin, TX 78741			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing 10/20/14 - 11/2/2014 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
Date 10/29/2014		Payee name Northeast Station			
Amount (\$) \$49.00		Payee address City; State; Zip Code 900 Blackson Ave Austin, TX 78752			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps for mailouts <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
Date 11/12/2014		Payee name Office Depot			
Amount (\$) \$5.19		Payee address City; State; Zip Code 816 Tirado Street Austin, TX 78752			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Hole Punch <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 6/10 Report: 11/15		<b>2</b> FILER NAME Daniel, Katrina (Ms.)		<b>3</b> ACCOUNT # (TEC filers) 00000004	
<b>4</b> Date 11/12/2014		<b>5</b> Payee name Office Depot			
<b>6</b> Amount (\$) \$17.30		<b>7</b> Payee address City; State; Zip Code 816 Tirado Street Austin, TX 78752			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Rubberbands  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Olivares, Christopher			
Amount (\$) \$420.00		Payee address City; State; Zip Code 3715 Ticonderoga Dr San Antonio, TX 78230			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing 10/20/2014 - 11/02/2014  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/12/2014		Payee name Olivares, Christopher			
Amount (\$) \$180.00		Payee address City; State; Zip Code 3715 Ticonderoga Dr San Antonio, TX 78230			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Canvassing  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/06/2014		Payee name Prosperity Bank			
Amount (\$) \$35.00		Payee address City; State; Zip Code 8770 Research Blvd Austin, TX 78758			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fee for a cancelled check  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 7/10 Report: 12/15		<b>2</b> FILER NAME Daniel, Katrina (Ms.)		<b>3</b> ACCOUNT # (TEC filers) 00000004	
<b>4</b> Date 11/04/2014		<b>5</b> Payee name Quality Seafood			
<b>6</b> Amount (\$) \$150.42		<b>7</b> Payee address City; State; Zip Code 5621 Airport Blvd Austin, TX 78751			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Watch  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/23/2014		Payee name Quality Seafood			
Amount (\$) \$273.05		Payee address City; State; Zip Code 5621 Airport Blvd Austin, TX 78751			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Kickoff  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/13/2014		Payee name Sophie Rousmaniere and Jay Monton			
Amount (\$) \$750.00		Payee address City; State; Zip Code 8202 Alcorn Circle Austin, TX 78748			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Video of three candidates  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/10/2014		Payee name Staples			
Amount (\$) \$46.30		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper, Index Jan-Dec, House of Doolittle Bar Harbor  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 8/10 Report: 13/15		<b>2 FILER NAME</b> Daniel, Katrina (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00000004	
<b>4 Date</b> 12/10/2014		<b>5 Payee name</b> Staples			
<b>6 Amount (\$)</b> \$28.68		<b>7 Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd Austin, TX 78723			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Calendars  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/10/2014		<b>Payee name</b> Staples			
<b>Amount (\$)</b> \$23.67		<b>Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd Austin, TX 78723			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Engineering 36x48  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/10/2014		<b>Payee name</b> Staples			
<b>Amount (\$)</b> \$6.48		<b>Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd Austin, TX 78723			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Posterboard  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:
<b>Date</b> 12/10/2014		<b>Payee name</b> Staples			
<b>Amount (\$)</b> \$79.49		<b>Payee address City; State; Zip Code</b> 1201 Barbara Jordan Blvd Austin, TX 78723			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Month planner, pencils, pens, + other office supplies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:	Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 9/10 Report: 14/15		<b>2</b> FILER NAME Daniel, Katrina (Ms.)		<b>3</b> ACCOUNT # (TEC filers) 00000004	
<b>4</b> Date 12/10/2014		<b>5</b> Payee name Staples			
<b>6</b> Amount (\$) \$78.99		<b>7</b> Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Dry Erase board, Markers, Eraser  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/28/2014		Payee name Stoneking, Taryn (Ms.)			
Amount (\$) \$240.00		Payee address City; State; Zip Code 2208 Pearl St. #307 Austin, TX 78705			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll 10/20/2014 - 10/26/2014  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Stoneking, Taryn (Ms.)			
Amount (\$) \$300.00		Payee address City; State; Zip Code 2208 Pearl St. #307 Austin, TX 78705			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mileage for duration of the campaign  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/02/2014		Payee name Stoneking, Taryn (Ms.)			
Amount (\$) \$240.00		Payee address City; State; Zip Code 2208 Pearl St. #307 Austin, TX 78705			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll 10/27/2014 - 11/02/2014  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	